Complete and mail this form, together with applicable fees, to: **Box ISSUE FEE** Assistant Commissioner for Patca Washington, D.C. 20231

RECEIVED

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1
through 4 should be completed where appropriate. All further correspondence including the Issue Fee
Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current
correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a)
specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
maintenance fee notifications.

Note: The certificate of a building that we can be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

Certificate of Mailing

DANIEL A CROWE BRYAN CAVE 245 PARK AVENUE NEW YORK NY 10167-0034 I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name) (Signature)

					j ,		(Date)	
APP	LICATION NO.	FILING DATE:	TOTAL CLAIMS		EXAMINER AND GROUP ART U	NIT:	DATE MAILED	
	09/021,890	02/11/98	054 (DEN, W		2855	09/13/99	
First Named Applicant	BOLES,	-	35 U S(154(b) term ext. =	0 Days	5	
TIFOF		,,		···· · · · · · · · · · · · · · · · · ·				

Express Mail No.: EL373387615US

INVENTION METHOD AND APPARATUS FOR MEASURING THE QUANTITY OF OUTDOOR AIR PROCESSED BY AN AIR PRECONDITIONING MODULE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN, TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 16972/9635	59 073-8 61 .	42 0 B 3	2 UTILI	TY YES.	\$605 . 00	12/13/99
1. Change of correspondence address Use of PTO form(s) and Customer \[\begin{align*} \text{Change of correspondence address PTO/SB/122} \) attached. \[\begin{align*} \text{"Fee Address" indication (or "Feed).} \]	Number are recommended, but ess (or Change of Corresponde	not required.	(1) the names of attorneys or age the name of a member a regis and the names of	the patent front page, lis up to 3 registered paten nts OR, alternatively, (2 single firm (having as a tered attorney or agent f up to 2 registered paten its. If no name is listed, no ted.	t 1 BRYAN a b 2	CAVE, LLP
3. ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assign Inclusion of assignee data is only a the PTO or is being submitted und filing an assignment. (A) NAME OF ASSIGNEE SEM	ee is identified below, no assign ppropiate when an assignment	nee data will appea has been previous	r on the patent. sly submitted to	The following fees are of Patents and Tradema X Issue Fee X Advance Order - # 0	arks):	ck payable to Commissione
(B) RESIDENCE: (CITY & STATE of Please check the appropriate assig ☐ individual ☐ corporation of the corpor	OR COUNTRY) Columbinee category Indicated below (or other private group entity	will not be printed o	on the patent)	DEPOSIT ACCOUNT N (ENCLOSE AN EXTRA Issue Fee Advance Order - # 0	O2-44 COPY OF THIS FO	'
The COMMISSIONER OF PATENTS (Authorized Signature)	AND TRADEMARKS IS reques	(Date		ation Identified above.		<u>e</u>
NOTE; The Issue Fee will not be acce or agent; or the assignee or other part Trademark Office.		e applicant; a regis	tered attorney		109 12060 Z	
Burden Hour Statement: This form depending on the needs of the indivi- to complete this form should be se Office, Washington, D.C. 20231. D ADDRESS. SEND FEES AND TH Patents, Washington D.C. 20231	ridual case. Any comments on to the Chief Information CO NOT SEND FEES OR CO	on the amount of the Difficer, Patent and DMPLETED FOR	ime required d Trademark		HKGHKRR1 00000022	er Ser
Under the Paperwork Reduction Ac of information unless it displays a v					BH 6661/5	
	T	RANSMIT THIS	FORM WITH FEI		1/31	68